

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000051939

**Entity Name:** ALLISON MILLER LLC

**Current Principal Place of Business:**

409 NE 13 AVE  
FORT LAUDERDALE, FL 33301

**Current Mailing Address:**

409 NE 13 AVE  
FORT LAUDERDALE, FL 33301 US

**FEI Number:** 45-5287543

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

SCHWARTZ, ALLISON  
409 NE 13 AVE  
FORT LAUDERDALE, FL 33301 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** ALLISON SCHWARTZ

04/25/2023

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name SCHWARTZ, ALLISON F  
Address 409 NE 13 AVE  
City-State-Zip: FORT LAUDERDALE FL 33301

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** ALLISON SCHWARTZ

MGR

04/25/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date